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FIFTH POPULATION INQUIRY AMONG GOVERNMENTS :

ECA MEMBER STATES PERCEPTIONS AND POLICIES ON DEMOGRAPHIC TRENDS IN RELATION TO DEVELOPMENT AS OF 1982

Prepared by :
ECA Population Division

INTRODUCTION

1. The United Nations Secretary-General invited all member States of the United Nations to participate in the Fifth Population Inquiry Among Governments: Monitoring of Government Perceptions and Policies on Demographic Trends and Levels in Relation to Development as of 1982. In addition to using the findings of the Inquiry in the monitoring of population policies as recommended in the World Population Plan of Action, the results of the Inquiry would also form an important component in preparations for the International Conference on Population to be held in Mexico in 1984.

2. An attempt is made here to present some of the findings on the Inquiry regarding the ECA member States. This is the first time that the ECA has published results of such inquiries undertaken by the United Nations. It should be noted that, of the 50 ECA member States, 39 replied to the Inquiry. Although in some replies not all the questions were answered, the response rate had drastically improved over previous Inquiries of this type. The findings presented pertain to the Inquiry as indicated by member States.

3. The findings of the Inquiry start with the overall summary of the various topics covered in the Inquiry followed by presentation of individual countries on subregional groupings.

PART I : OVERALL SUMMARY

A SUMMARY ON PERCEPTION ON THE PRESENT RATE OF POPULATION GROWTH

4. Countries which consider the present rate of population satisfactory are : Ivory Coast, Libya, Mauritania, Mozambique and Zaire (five countries).

5. Countries which consider the present rate of population growth unsatisfactory, because it is too high are : Algeria, Burundi, Egypt, Ethiopia, The Gambia, Lesotho, Liberia, Mauritius, Morocco, Rwanda, Senegal, Sierra Leone, Swaziland, Tanzania, Tunisia and Uganda (16 countries).

6. Countries which consider the present population growth rate not satisfactory because it is too low are : Equatorial Guinea and Gabon (two countries).

7. The following countries want to reduce the present rate of population growth : Algeria, Burundi, Egypt, The Gambia, Lesotho, Mauritius, Morocco, Rwanda, Tunisia and Uganda (10 countries).

8. The following countries want to increase the present rate of population growth : Equatorial Guinea, Gabon, Ivory Coast and Mauritania (four countries).

9. Countries which have not expressed their view regarding the present rate of population growth are : Benin, Botswana, Cameroon, Central African Republic, Comoro, Congo, Djibouti, Guinea Bissau, Madagascar, Mali, Sao Tome and Principe, Somalia, Togo, Zambia and Zimbabwe (15 countries).

10. The following countries have no policy or no explicit policy with regard to the present rate of population growth : Benin, Botswana, Cameroon, Central African Republic, Comoro, Congo, Djibouti, Ethiopia, Guinea Bissau, Liberia, Libya, Madagascar, Mali, Mauritania, Mozambique, Sao Tome and Principe, Sierra Leone, Senegal, Somalia, Swaziland, Tanzania, Togo, Zaire, Zambia and Zimbabwe (25 countries).

SUMMARY ON MORTALITY AND MORBIDITY

11. It is noted that 35 countries out of the 39 which replied to the Inquiry expressed the opinion that they considered the present conditions of health and level of mortality to be unacceptable. Some of them had identified infants, mothers, the aged and rural population as being of special policy concern in relation to present level of mortality. Many of them were implementing primary health care programmes in an effort

to achieve Health for all by the year 2000 and reducing the incidence of morbidity and mortality.

SUMMARY ON PERCEPTIONS ON FERTILITY :

12. Countries which consider their present level of fertility satisfactory and policy, if any, are : Ivory Coast (policy to increase level of fertility), Libya (no policy on fertility), Mauritania (no explicit policy on fertility) and Mozambique (no policy on fertility), (four countries).

13. Countries which consider their present level of fertility not satisfactory because it is too low are : Congo, Equatorial Guinea, Gabon,(all with a policy to increase fertility), (three countries).

14. Countries which consider their present level of fertility not satisfactory because it is too high are : (a) Algeria, Burundi, Egypt, The Gambia, Lesotho, Mauritius, Morocco, Rwanda, Senegal, Tunisia, and Uganda, all these have policies to lower the level of fertility; (b) Ethiopia, Liberia, Sierra Leone, Swaziland and Tanzania, these countries either have no policy or no explicit policy on the present level of fertility (16 countries for (a) and (b).

15. Countries which have not expressed views on their present level of fertility and policy, if any, are : Benin, Botswana, Cameroon, Central African Republic, Comoro, Djibouti, Guinea Bissau, Madagascar, Mali, Somalia, Togo, Upper Volta, Zaire, Zambia and Zimbabwe. Zimbabwe has a policy to lower the level of fertility, while the other countries either have no policy or no explicit policy with regard to the present level of fertility (15 countries).

16. In many countries,programmes and measures are implemented which have an impact on fertility eg. family planning programmes and/or measures for the improvement of the status of women. The objectives of such measures and programmes for some countries are both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being; but for many countries the objective of these is mainly to improve maternal and child health and family well-being.

SUMMARY ON PERCEPTIONS ON POPULATION DISTRIBUTION AND INTERNAL MIGRATION

17. The issues on population distribution attract the interest of most ECA member States. Twenty-eight out of 39 countries which replied to the Inquiry (72 per cent)

indicated that they were not satisfied with the present population distribution in their countries. It is observed that 14 countries desire major changes from the present population distribution, while 12 countries consider that minor changes in population distribution would be desirable. There were 12 countries which did not formulate a view on the present population distribution within their countries and one country did not give its perception on population distribution. It is noted that 20 countries indicated that they have policies to modify population distribution, 15 have no explicit policy on this, two have no policy to modify population distribution and in one case there was no information. See details in Table I below. Many countries expressed the view that the population growth rates of the largest metropolitan area or other urban areas were not satisfactory because the growth rates were too high. To this effect many countries have policies to reduce in-migration to the largest metropolitan areas and/or other urban areas and to reduce out-migration from rural areas.

Table I

Major changes in present population Distribution desirable	Minor changes in present population Distribution desirable	No view formulated on present population Distribution
Algeria 1/	Burundi 1/	Benin 2/
Egypt 1/	Cameroon 2/	Botswana 2/
Ivory Coast 1/	Central African Rep. 1/	Comoro 3/
Libya 1/	Ethiopia 2/	Congo 1/
Mauritania 1/	The Gambia 2/	Djibouti 2/
Morocco 1/	Guinea Bissau 2/	Gabon
Mozambique 1/	Lesotho 2/	Mali 2/
Rwanda 1/	Liberia 2/	Mauritius 3/
Sierra Leone 2/	Madagascar 1/	Sao Tome & Principe
Tanzania 1/	Senegal 1/	Somalia 2/
Togo 1/	Uganda 2/	Swaziland 2/
Tunisia 1/	Zimbabwe 1/	Upper Volta 1/
Zaire 1/		
Zambia 1/		

1/ Policy to modify population distribution.

2/ No explicit policy on population distribution.

3/ No policy on population distribution.

SUMMARY ON INTERNATIONAL MIGRATION

18. In most of the ECA member States, international migration is not considered a serious issue, as about 60 per cent of the member States which completed the Inquiry have not expressed a view on recent levels of immigration or emigration. The countries which consider the recent level of immigration to have been significant are : Comoro, Djibouti, Gabon, The Gambia, Ivory Coast, Libya and Zimbabwe. For the following countries the recent level of immigration are said to have been insignificant : Algeria, Botswana, Burundi, Egypt, Mauritius, Tanzania and Tunisia. Some countries indicated that the refugee issue was a serious problem. Regarding recent emigration, Algeria, Botswana, Burundi, Ivory Coast, Libya, Mozambique and Tanzania reported the level to have been insignificant. Benin, Lesotho, Mali and Mauritania reported the recent emigration level to have been unsatisfactorily too high. But Mauritius and Morocco indicated the level to have been too low, while Egypt, Gabon and Tunisia said the level was satisfactory.

Table II : PERCEPTIONS ON RECENT LEVELS OF IMMIGRATION

Recent immigration level significant	Recent immigration level not significant	No view expressed
Comoro	Algeria	Benin
Djibouti	Botswana	Cameroon
Gabon	Burundi	Central Afr.Rep.
The Gambia	Egypt	Congo
Ivory Coast	Mauritius	Ethiopia
Libya	Tanzania	Guinea Bissau
Zimbabwe	Tunisia	Lesotho
		Liberia
		Madagascar
		Mali
		Mauritania
		Morocco
		Mozambique
		Rwanda
		Sao Tome & Principe
		Senegal
		Sierra Leone
		Somalia
		Swaziland
		Togo
		Upper Volta
		Uganda
		Zaire
		Zambia

TABLE III : PERCEPTIONS ON RECENT EMIGRATION LEVELS

Satisfactory	Not satisfactory, too high	Not satisfactory too low	Not significant	No view expressed
Egypt	Benin 1/	Mauritius 3/	Algeria 1/	Cameroon
Gabon 1/	Lesotho 1/	Morocco 3/	Botswana	Cen.Afr.Rep.
Tunisia 2/	Mali 1/		Burundi	Comoro
	Mauritania 2/		Ivory Coast	Congo
			Libya	Djibouti
			Mozambique 1/	Equat.Guinea 2/
			Tanzania	Ethiopia
				Gambia 2/
				Guin.Bissau
				Liberia
				Madagascar
				Rwanda 3/
				Sao Tome & Principe
				Senegal 2/
				Sierra Leone
				Somalia
				Swaziland
				Togo
				Uganda
				Upper Volta
				Zaire
				Zambia
				Zimbabwe

1/ The Government wants to reduce the future level.

2/ The Government wants to maintain the future level more or less constant.

3/ The Government wants to increase the future level.

SUMMARY ON INSTITUTIONAL ARRANGEMENTS FOR INTEGRATING POPULATION FACTORS IN DEVELOPMENT PLANNING

19. The data below shows that in 20 countries there are government agencies responsible for the formulation or co-ordination of population policies and in 18 countries such agencies do not exist. It is revealed that 26 countries reported the existence of a unit or office responsible for taking population variables into account in planning while in 12 countries such a unit or office did not exist.

TABLE IV

Government agency for formulation or co-ordination of population policies		Unit or office responsible for taking into account population factors in planning	
Exists	Does not exist	Exists	Does not exist
Algeria	Benin	Algeria	Botswana
Burundi	Botswana	Burundi	Central African Rep.
Egypt	Cameroon	Cameroon	Comoro
Equatorial Guinea	Central African Rep.	Congo	Djibouti
Gabon	Comoro	Equatorial Guinea	Egypt
The Gambia	Congo	Gabon	Ethiopia
Ivory Coast	Djibouti	Guinea Bissau	The Gambia
Liberia	Ethiopia	Ivory Coast	Sao Tome & Principe
Madagascar	Guinea Bissau	Lesotho	Swaziland
Mali	Libya	Liberia	Tanzania
Mauritania	Mozambique	Libya	Zaire
Mauritius	Sao Tome & Principe	Madagascar	Zimbabwe 1/
Morocco	Somalia	Mali	
Rwanda	Swaziland	Mauritania	
Senegal	Tanzania	Mauritius	
Sierra Leone	Togo	Mozambique	
Tunisia	Zaire	Morocco	
Uganda	Zimbabwe	Rwanda	
Upper Volta		Senegal	
Zambia		Sierra Leone	
		Somalia	
		Togo	
		Tunisia	
		Uganda	
		Upper Volta	
		Zambia	

1/ Arrangements being made to establish a Population Planning Unit.

SUMMARY ON FUTURE AREAS OF CO-OPERATION IN POPULATION

20. For the next decade, many ECA member States have accorded high priority to various population programmes for which international co-operation in the form of technical and/or financial assistance will be required. The distribution of the countries by programme areas based on replies to the Inquiry was as follows : (a) basic data collection and processing: 27; (b) population communication and education: 26; (c) population dynamics including analysis and training in demographic research: 25; (d) formulation, implementation and evaluation of population policies and programmes: 19; (e) special programmes including status of women, children, youth and the aged: 16; and (f) population redistribution programmes: 15.

PART II : COUNTRY SUMMARIES BY SUBREGION

1. North Africa

ALGERIA

Population growth

21. The Government considers that the present rate of population growth is not satistactory because it is too high. The present rate of population growth is thought to have a minor adverse effect on socio-economic development. There is a Government policy to reduce the rate of population growth.

Morbidity and mortality

22. Present conditions of health and level of mortality are considered to be unacceptable. Infants are identified as being of special policy concern in relation to present mortality levels. The Government has identified the development of primary health care as being of special policy concern.

Fertility and the family

23. Present levels of fertility are considered to be unsatisfactory because they are too high. The Government has a policy of intervention to fertility with the objective of both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being. The Government wants to reduce fertility.

24. Measures and programmes implemented by the Government with direct relation to fertility include : family planning programmes; measures for the improvement of the status of women; and measures for the care and protection of the aged.

Population distribution and internal migration

25. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. There is a Government policy to modify population distribution between regions. The population of the largest metropolitan area is considered to be unsatisfactorily too high and the Government would like to reduce in-migration to the largest metropolitan area.

International migration

26. The recent immigration level into the country is considered to have been insignificant. Similarly, the recent level of emigration is also said to have been insignificant. However, the Government would like to reduce the future level of emigration. It is felt that the recent emigration level has had no significant effect on the enhancement of socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

27. The Secretariat d'Etat aux Affaires Sociales has been responsible for the formulation or co-ordination of population policies since 1982. There is a unit within the planning organization responsible for taking population variables into account in planning.

Areas for international co-operation in population

28. For the next decade, the Government has accorded the following areas high priority for international assistance : (a) basic data collection and processing, (b) population dynamics research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, population communication and education, (f) special programmes, including the status of women, children, youth, and the aged.

EGYPT

Population growth

29. The present rate of population growth is considered to be unsatisfactory because it is too high and the Government has adopted a policy to reduce this. It is considered that the present rate of population growth has had a major negative effect on the achievement of the country's social and development objectives. By the year 2000, the Government has a target for the population growth rate to be between 1.0 and 1.3 per cent per annum. This is expected to be achieved through intervention efforts to reduce fertility, as well as infant and child mortality.

Morbidity and mortality

30. Current conditions of health and mortality levels are considered to be unacceptable. Infants, children and mothers are identified as being of special policy concern in relation to present levels of mortality. The Government has objectives to (a) decrease infant mortality rates, (b) expand maternal and child health care centres

particularly in the rural areas, (c) provide potable water in deprived areas, (d) expand family planning services in remote rural villages, and (e) control parasitic infectious diseases.

Fertility and the family

31. The present fertility level is not satisfactory because it is too high. The Government has a policy of intervention directed at fertility with the objective of both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being. The Government wishes to reduce fertility levels. Measures or programmes implemented for intervention to fertility include the following: (a) family planning programmes, (b) measures for improving the status of women and (c) measures for the care and protection of the aged. The Government has a target of fertility reduction from a crude birth rate of 40 per 1,000 in 1980, to 20 per 1,000 by the year 2000. With regard to family planning, the Government target is that family planning facilities should be available to 60 per cent among the married and those in the reproductive age group by the year 2000.

32. Some methods with regard to the diffusion of information and access to methods on modern contraception are permitted by law and others are prohibited. Abortion and sterilization are among those prohibited. Direct Governmental support (such as programmes implemented by governmental services) is provided on access to information and methods of modern contraception.

Population distribution and internal migration

33. The Govennment considers that major changes from the present pattern of population distribution within its boundaries would be desirable. The Government has formulated a policy in which changes in urban-rural population balance is explicitly intended. Present population growth rates in the largest metropolitan area and other urban areas are considered to be unsatisfactorily too high. The internal migration goals are to decrease in-migration to the largest metropolitan areas and other urban areas and to decrease out-migration from rural areas.

International migration

34. Recent immigration into the country is considered to have been insignificant while recent emigration is said to have been satisfactory and the Government wants to maintain the level of emigration more or less constant in the future. Emigration is considered to have contributed positively to socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

35. The Supreme Council for Population and Family Planning is responsible for the formulation or co-ordination of population policies. That organization was given this responsibility in 1965. There is no unit within the planning organization charged with the responsibility of taking population variables into account in planning. The Population and Family Planning Board, the Population Studies and Research Centre and the Central Agency for Public Mobilization and Statistics (CAPMAS) are the institutions responsible for providing information on population and development interrelationships.

Areas for international co-operation in population

36. The Government has accorded high priority in the following areas for international assistance for the next decade: (a) basic data collection and processing, National Household Survey Capability Programme (NHSCP),(population censuses, and provision of computer equipment), (b) population dynamics including analysis and training in demographic research (long-term training programmes, computer data analyses, packages), (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes (clinical equipment), (e) population communication and education (mass media equipment and support), (f) special programmes including status of women, children, youth and the aged (special programmes survey and advisory services), (g) population redistribution programmes (regional and interregional experts in integrated rural development and dispersed urbanization).

LIBYAN ARAB JAMAHIRIYA

Population growth

37. The present rate of population growth is considered to be satisfactory and there is no policy with regard to the rate of population growth. The Government considers that the country's rate of population growth contributes positively to the achievement of its objectives for social and economic development.

Morbidity and mortality

38. Present conditions of health and level of mortality are considered to be acceptable. However, there is concern to take the necessary protective and remedial methods for children aiming at reducing mortality rates and to tackle health problems associated with manufacturing industries.

Fertility and the family

39. The Government considers the present fertility level to be satisfactory and as such there is no policy of intervention to fertility. Measures and programmes implemented by the Government which have a relation to fertility include: (a) measures for the improvement of the status of women, (b) child welfare allowances, (c) maternity/paternity benefits, (d) other family benefits, (e) measures for the care and protection of the aged.

Population distribution and internal migration

40. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. There is a policy to modify population distribution to bring changes in the urban-rural balance and changes between regions. The present rate of population growth in the largest metropolitan area and other areas are considered to be unsatisfactorily too high and those in the rural areas as too low. Government policy is to increase in-migration to rural areas and decrease in-migration to the largest metropolitan areas and other urban areas.

International migration

41. Recent immigration levels into the country are considered as significant. The immigration of workers is currently of active policy concern. At present the Government policy is to reduce the level of immigration in the future. Targets for 1985 are to have a non Libyan population of 549,200 of whom 383,400 will be workers. The Government considers, however, that immigration has contributed positively to economic development. With regard to the recent emigration level the Government considers that this has not been significant.

Institutional arrangements for integrating demographic factors into development planning

42. There is no Government agency responsible for the formulation or co-ordination of population policies. The Directorate of General Demography and Manpower Planning Department has been responsible for taking population variables into account in planning since 1966.

MOROCCO

Population growth

43. The Government considers that the present rate of population growth is not satisfactory because it is too high. There is a policy of intervention to reduce the rate of population growth. The present rate of population growth is considered to have a major negative contribution to social and economic development.

Morbidity and mortality

44. The Government considers present conditions of health and level of mortality as being unacceptable. The Government target is to reduce infant mortality from 130 per 1,000 in 1980-1981 to 65 per 1,000 in 1985.

Fertility and the family

45. The Government considers the present level of fertility to be unsatisfactory because it is too high. Government policy of intervention to fertility has the objective of both to modify the effect of fertility on population growth and to improve maternal and child health and family well-being. The Government has an objective to lower fertility. Some of the measures and programmes implemented by the Government which have some relation to fertility include: (a) family planning programmes, (b) measures for the improvement of the status of women, (c) child welfare allowances, (d) maternal/paternal benefits, (e) other family benefits and (f) measures for the care and protection of the aged.

46. The law permits all methods regarding diffusion of information and access to methods of modern contraception. Direct Government support to such programmes is implemented by governmental service regarding access to information, and access to methods of modern contraceptions is provided. Regarding family planning, the Government target is to reach a coverage of 24 per cent of those in the reproductive age group (reference dates are not given).

Population distribution and internal migration

47. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. Government policy on population distribution has the following goals explicitly intended: (a) to bring changes in population distribution between urban places, (b) to bring changes in the urban-rural balance (c) to limit the exodus to the largest metropolitan areas and other urban areas, and (d) to reduce out-migration from rural areas.

International migration

48. Although the Government has not expressed its view on the recent level of immigration into the country, immigration of workers is currently of active policy concern, and Government policy is to reduce the future level of immigration. Immigration is said to have contributed positively to economic development, as well as to social and cultural development. The recent level of emigration is said to have been unsatisfactory because it has been too high and yet the Government policy is to increase future emigration levels. The Government considers that emigration has contributed positively to socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

49. The Supreme Commission on Population is responsible for the formulation or co-ordination of population policies since 1967. The Direction de la planification (division de la planification des resscources humaines) has been responsible for taking population variables into account in planning since 1965 . Centre des étude et recherches démographiques (CERED) has been responsible for providing information on population development interrelationships since 1970.

Areas for international co-operation in population

50. The Government has accorded high priority to the following areas for international assistance for the next decade: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) family planning programmes, (d) population communication and education, (e) population redistribution programmes.

TUNISIA

Population growth

51. The Government is not satisfied with the present rate of population growth because it is still high. There is a policy to reduce the rate of population growth. The Government considers that the present rate of population growth has a major negative contribution to social and economic development.

Morbidity and mortality

52. Current health conditions and the mortality level are considered as unacceptable. Infants, women in the reproductive age group and population in the regions without adequate established hospitals, especially in western Tunis, are identified as being of special policy concern in relation to the present level of mortality. There is great emphasis on primary health care. The Government has a target for life expectancy at birth to reach 68 years by the end of the century.

Fertility and the family

53. The present fertility level is considered to be unsatisfactory since it is too high. Government policy of intervention in fertility has the main objectives of both modifying the effect of fertility on the rate of population growth and improving maternal and child health and family well-being. The object of fertility modification is to lower the fertility level.

54. Measures and programmes implemented which have a relation to fertility include: (a) family planning programmes, (b) measures for the improvement of the status of women, (c) change in the minimum age at marriage from 15 years in 1956 to 17 years in 1964 for females, and for males from 18 to 20 years during the same period. All methods regarding diffusion of information and access to all methods of modern contraception are permitted by law. Direct Governmental support (such as programmes implemented by government services) to access to information, and access to modern methods of contraception is provided. The Government has targets for the coverage of those practicing family planning to increase from 27 per cent in 1980 to 40 per cent by 1986 for the country as a whole. Targets for rural areas are to increase from 18 per cent in 1980 to 36 per cent in 1986 and for urban areas from 35 per cent in 1980 to 45 per cent by 1986.

Population distribution and internal migration

55. The Government considers that major changes from the present pattern of population distribution within its boudaries would be desirable. Government policy is to bring in changes in the urban-rural balance and between the regions. The present rate of population growth in the largest metropolitan areas and other urban areas is considered to be unsatisfactorily too high. The Government policy is to decrease in-migration to metropolitan areas and to decrease out-migration from rural areas.

International migration

56. The recent immigration level into the country is considered to have been insignificant and has had no great effect, either positive or negative, on economic, social and cultural development. The recent emigration level is, however, considered to have been satisfactory and the Government policy is to maintain the level of emigration more or less constant in the future. It is considered that emigration has contributed positively to socio-economic development. Future emigration quantitative targets are 10,000 to 15,000 departures between 1982 and 1986 and 20,000 returning during the same period.

Institutional arrangements for integrating demographic factors into development planning

57. The Ministry of Planning and Finance is responsible for the formulation or co-ordination of population policies since 1961. The Institute National des Statistics and Direction des ressources humaines in the Ministry of Planning and Finance have been responsible for taking population variables into account in planning since 1961. There is no institution chiefly responsible for providing information on population development interrelationships.

Areas for international co-operation in population

58. The Government has accorded high priority to the following areas for international assistance for the next decade: (a) basic data collection and processing, (b) family planning programmes, (c) population communication and education, (d) population distribution programmes.

2. West Africa

BENIN

Population growth

59. The Government has not expressed views on the present rate of population growth and its effects on economic and social development. There is no explicit policy with regard to the rate of population growth.

Morbidity and mortality

60. The present conditions of health and the level of mortality are considered as being unacceptable. The Government has identified those aged 0-4 as being of special policy concern in relation to the present level of mortality. The Government places emphasis on preventive health care.

Fertility and the family

61. The Government has not expressed views on the present level of fertility. The law permits access to information on and methods regarding modern contraception. There is indirect Government support to private agencies dealing with information and methods of modern contraception.

Population distribution and internal migration

62. The Government has not expressed views regarding the present pattern of population distribution within its boundaries. However, the Government is not satisfied with the present rate of population growth in the largest metropolitan areas because it is said to be too high. There is no policy with regard to internal migration into or out of urban areas and rural areas.

International migration

63. There is no Government view on the recent immigration level into the country, while the recent emigration level is felt to have been unsatisfactory because it has been too high. Government policy is to reduce the future emigration level. The Government considers that emigration has had a negative effect on socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

64. There is no single government agency responsible for the formulation or co-ordination of population policies. There does not seem to be a unit within the planning organization responsible for taking population variables into account in planning.

Areas for international co-operation in population

65. For the next decade, the Government has accorded priority to the following areas for which international assistance will be required: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies, (d) family planning programmes.

THE GAMBIA

Population growth

66. The Government is not satisfied with the present rate of population growth because it is too high. There is a policy to reduce the rate of population growth. The reduction is expected to redress the imbalance between national needs and resources and to facilitate economic and social development. It is stated further that "a reduction in the population growth rate would, in the long run, reduce the shortage of suitable farmland, food, and energy needs and ease the strain on education, health, and other social services".

Morbidity and mortality

67. Present conditions of health and the level of mortality are considered to be unacceptable. The Government is particularly concerned about under-nutrition and malnutrition among the rural children and pregnant mothers especially during the rainy season (June to October). Primary health care, maternal and child health are identified as special issues regarding morbidity and mortality. The Government has an objective of reducing morbidity and mortality rates.

Fertility and the family

68. The present level of fertility is said to be not satisfactory because it is too high. There is policy of intervention on fertility with the major objectives of both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being. The Government wants to lower fertility levels.

69. Some methods regarding diffusion of information and access to methods of modern contraception are permitted by law and others are prohibited. Abortion is illegal. Both direct and indirect Government support is provided on access to information and methods of modern contraception. The Government wants all women of child bearing age and attending Maternal and Child Health (MCH) clinics to have access to family planning facilities. The Government recognizes that family planning can help to reduce the number of abortions and, consequently, the risk of death, and improve the health of the mothers and children. Government strategy is to make parents understand the value of having only those children for whom they can provide adequate care, nutrition, housing accommodation, clothing and education.

Population distribution and internal migration

70. Government considers that minor changes from the present pattern of population distribution within its boundaries would be desirable. Although there is no explicit policy either to maintain or modify the distribution of population within its territory, the desire to slow down rural to urban migration is implicit in several policy statements, e.g. on the rural development strategy and the agriculture programme. The Government considers the present rate of population growth in the largest metropolitan areas to be too high.

International migration

71. The recent immigration level into the country is considered to be significant. Immigration of workers and undocumented/illegal immigrants are of active policy concern. The Government intends to reduce the future level of immigration but has not expressed its view on the recent level of emigration and Government policy is to maintain the future level of emigration more or less constant.

Institutional arrangements for integrating demographic factors into development planning

72. The Ministry of Economic Planning and Industrial Development has been responsible for the formulation or co-ordination of population policies since 1974. Though no separate unit exists for taking population variables into planning, this is done by the overall planning section of the Directorate of Planning and Industrial Development. Plans are underway to have a separate unit to deal with population and employment matters.

Areas for international co-operation in population

73. For the next decade the Government has accorded priority to the following areas for which international assistance will be required: (a) formulation, implementation

and evaluation of population policies and programmes (expertise), (b) population communication and education (population education in schools), (c) basic data collection and processing, (d) population dynamics including analysis and training in demographic research (training of a counterpart population planner); and family planning programmes are accorded second priority.

GUINEA-BISSAU

Population growth

74. The Government has not expressed its view on the present rate of population growth and there is no explicit policy with regard to the population growth rate. There is no Government view on the effect of the population growth rate on socio-economic development.

Morbidity and mortality

75. Present conditions of health and the mortality level are considered to be unacceptable. Those aged 0-4 years are identified as being of special policy concern in relation to the present level of mortality, mortality targets are to reduce the infant mortality rate to 50 per 1,000 by the year 2000.

Fertility and the family

76. The Government has not expressed views on the present level of fertility and there is no explicit policy with regard to fertility. Intervention to fertility has the major objective of improving maternal and child health and family well-being. The Government, however, is implementing measures for the improvement of the status of women.

Population distribution and internal migration

77. Minor changes from the present pattern of population distribution within its boundaries are considered to be desirable. There is no explicit policy on internal population distribution within its territory. However, the Government wants to bring changes in the urban-rural balance. The population growth rate in the largest metropolitan areas is considered to be unsatisfactorily too high while that in rural areas is considered to be too low. The Government, consequently, wants to increase out-migration from the largest metropolitan areas and reduce out-migration from rural areas.

International migration

78. The Government has not expressed its views on the recent level of immigration into the country and on the recent level of emigration nor their effect on socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

79. There is no Government agency responsible for the formulation or co-ordination of population policies. The Ministry of Planning has been responsible for taking population variables in planning since 1981.

Areas for international co-operation in population

80. For the next decade, the areas accorded priority for international assistance in population are: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) population communication and education, (e) special programmes including the status of women, children, youth and the aged, and (f) population redistribution programmes.

IVORY COAST

Population growth

81. Although the Government is satisfied with the present rate of growth, there is a policy to increase the rate of population growth. It is believed that the present rate of growth had a minor contribution to the achievement of its objective for social and economic development.

Morbidity and mortality

82. Present conditions of health and the mortality level are considered to be acceptable. However, the Government has identified those aged 0-4 and mothers as being of special policy concern in relation to the present level of mortality. Primary health care is of special policy concern.

Fertility and the family

83. The Government considers the present level of fertility to be satisfactory. The intervention directed at fertility has the objective of both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being. The modification of fertility has the objective of increasing the

level of fertility. Measures and programmes implemented in relation to the policy of intervention to influence fertility include: (a) family planning programmes, (b) measures for the imporvement of the status of of women, (c) child welfare alllowances, (d) maternity/paternity benefits, and (e) other family benefits.

Population distribution and internal migration

34. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. The Government policy on population distribution has the following goals explicitly intended: (a) changes in the distribution of rural population, (b) changes in the distribution of the population between urban places, (c) changes in the urban-rural balance, and (d) changes between regions. Population growth in the largest metropilitan areas is considered to be too high but that of other urban areas to be satisfacotry while that of the rural areas is considered to be unsatisfactory because it is too low. Government policy is to increase in-migration into rural areas and to reduce in-migration to the largest metropolitan areas; and to decrease out-migration from rural areas.

International migration

35. The recent level of immigration into the country is considered to have been significant and present Government policy aims at reducing the future level of immigration. It is considered that immigration has contributed positively to economic development. With regard to the recent level of emigration, this is considered to have been insignificant.

Institutional arrangements for integrating demographic factors into development planning

36. The Comite National de la Statistique et de la Normalization Comptable has had responsibility for the formulation or co-ordination of population policies since 1982. The Direction Du Plan in the Ministry of Planning and Industry has been responsible for taking population variables into account in planning since 1965.

Areas for international co-operation in population

37. For the next decade, the Government has accorded priority to the following areas for which international assistance will be required: (a)

basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women children, youth and the aged, and (g) population distribution programmes.

LIBERIA

Population growth

38. The present population growth rate is considered to be unsatisfactory because it is too high. However, there is no policy with respect to the population growth rate. It is considered that the country's present rate of population growth has had a major negative effect on socio-economic development.

Morbidity and mortality

39. The Government considers the present conditions of health and the level of mortality to be unacceptable. Children and mothers are identified as being of special policy concern in relation to present level of mortality. The Government considers that a reduction of the still high rates of morbidity and mortality is an important aspect of population policy and programmes.

Fertility and the family

90. The present level of fertility is considered to be unsatisfactory because it is said to be too high. There is no explicit policy with regard to fertility. Intervention to fertility has the major objective to improve maternal and child health and family well-being. Some of the measures and programmes implemented, which have a direct effect on fertility, include family planning programmes and measures for the improvement of the status of women. The law permits some methods and prohibits others with regard to diffusion of information and access to methods of modern contraception. Indirect Government support (such as to private agencies) on access to information and methods of modern contraception is given.

Population distribution and internal migration

91. The Government considers that minor changes from the present pattern of population distribution within its boundaries would be desirable. There is no explicit policy with regard to population distribution within its territory. However, changes are sought in the rural-urban balance. The Government considers the present rate of population growth in the largest metropolitan areas and other urban areas to be too high and has expressed the desire to reduce out-migration from rural areas.

International migration

92. The Government has not expressed views on the recent levels of immigration and emigration.

Institutional arrangements for integrating demographic factors into development planning

93. The Ministry of Planning and Economic Affairs is responsible for the formulation or co-ordination of population policies. The Population Division in the Bureau of Statistics is responsible for taking population variables in planning.

Areas for international co-operation in population

94. For the next decade, areas accorded high priority, for which international assistance will be required are: (a) basic data collection and processing (training, equipment and support), (b) population dynamics including analysis and training in demographic research (advisory services), (c) formulation, implementation and evaluation of population policies and programmes (advisory services), (d) population communication and education (advisory services), (e) special programmes including the status of women, children, youth, and the aged (advisory services), and (f) population redistribution programmes (equipment and supplies).

MALI

Population growth

95. The Government has not expressed views on the present rate of population growth and there is no explicit policy with regard to population growth. There is no Government view regarding the effect of population growth rate on socio-economic development.

Morbidity and mortality

96. The Government considers present conditions of health and level of mortality to be unacceptable. Children, mothers and the rural population in general are identified as being of special policy concern in relation to the present level of mortality. The Government considers primary health care as one of the policy issues.

Fertility and the family

97. The Government has not expressed views on the present level of fertility and its policy of intervention to fertility has the major objective of improving maternal and child health and family well-being. Family planning programmes are implemented with this purpose. The law permits some methods of contraception and prohibits others. Sterilization and abortion are prohibited. Direct Government support (such as programmes implemented by governmental services) is provided on the diffusion of information on methods and access to methods of modern contraception.

Population distribution and internal migration

98. The Government has not formulated an opinion on the present population distribution within its boundaries and there is no policy either to maintain or modify population distribution within its territory. However, the Government wants to reduce in-migration to the largest metropolitan areas and other urban areas and to decrease out-migration from rural areas.

International migration

99. The Government has not expressed its view on the recent level of immigration into the country, but the recent level of emigration is considered to have been unsatisfactory because it has been too high. Government policy is to reduce the future level of emigration.

Institutional arrangements for integrating demographic factors into development planning

100. The Commission for Human Resources is responsible for the formulation or co-ordination of population policies. Arrangements are underway for the establishment of a population unit in the National Planning Office. This unit will be responsible for taking into account population variables in planning.

Areas for international co-operation in population

101. For the next decade, the Government has accorded high priority to the following areas, for which international assistance will be sought: (a) population data collection and analysis, (1986 population census), (b) population dynamics including analysis and training in demographic research (demographic survey), (c) formulation, implementation and evaluation of population policies and programmes (population unit), (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women, children, youth and the aged.

MAURITANIA

Population growth

102. The Government considers the present rate of population growth to be satisfactory. Though there is no policy with regard to population growth rate, the Government wants to increase the rate of population growth. It is the Government's view that the country's present rate of population growth has a major positive contribution to socio-economic development.

Morbidity and mortality

103. Present conditions of health and levels of mortality are considered to be unacceptable. The Government has identified the 0-5 years population group as being of special policy concern in relation to the present level of mortality, particularly infant mortality.

Fertility and the family

104. The Government considers the present level of fertility to be satisfactory and there is no explicit policy with regard to fertility. The following measures and programmes, which have some relation to fertility are carried out: (a) child welfare allowances, (b) maternity/paternity benefits, (c) other family benefits, and (d) measures for the care and protection of the aged.

Population distribution and internal migration

105. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. The policy of the Government is to bring changes in the urban-rural balance.

The present rate of population growth in the largest metropolitan areas and other urban areas is considered to be unsatisfactorily too high. Government policy is to make the population in the rural areas remain in the rural areas by improving conditions in those areas through the increase of agricultural projects by the extension of irrigation projects.

International migration

106. The Government has not expressed its view on the recent level of immigration into the country. However, the recent emigration level is considered to be unsatisfactory because it is too high, and the Government indicates that it would like to maintain the future emigration level more or less constant.

Institutional arrangements for integrating demographic factors into development planning

107. The Direction de la Statistique (Centre d'Etudes Demographiques et Sociales) is responsible for the formulation or co-ordination of population policies since 1960. The Service Des Etudes (Direction de la Planification) is responsible for taking population variables into account in planning. Centre d'Etudes Demographiques et Sociales (Direction de la Statistique) has been responsible for providing information on population-development interrelationships since 1980.

Areas for international co-operation

108. For the next decade, the Government has accorded high priority to the following areas for which international assistance will be required: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) population communication and education, and (e) population redistribution programmes.

SENEGAL

Population growth

109. The Government is not satisfied with the present rate of population growth because it is too high. However, there is no explicit policy with regard to the rate of population growth. The Government considers

that the present rate of population growth has made a minor contribution to the achievement of its objectives for social and economic development.

Morbidity and mortality

110. Present conditions of health and the mortality level are considered to be unacceptable. Those aged 0-5 and women in the age group 15 to 49 years are identified as being of special policy concern in relation to the present level of mortality. The Government approved health recommendations from the 1974 Population Conference in Bucharest and those from the Alma Ata Conference in 1978. It popularized the need for Health for All by the Year 2000 and there is mass participation efforts for implementation of primary health care.

Fertility and the family

111. The Government is not satisfied with the present level of fertility because it is said to be too high. The major objectives of Government policy of intervention to fertility are both to modify the effect of fertility on the rate of population growth and to improve maternal and child health and family well-being. The objective of modification of fertility is to lower the level of fertility. Improvement on the status of women is to be implemented as one of the measure and programmes to influence the level of fertility. The law permits all methods regarding diffusion of information and access to methods of modern contraception. The Government provides indirect support to these activities.

Population distribution and internal migration

112. Minor changes from the present pattern of population distribution within the country are considered to be desirable. There is a Government policy to modify the population distribution, especially modification in the urban-rural balance. Present rates of population growth in the largest metropolitan areas and other urban areas are considered to be too high and those in rural areas as too low. There is no policy on internal migration into or out of urban areas or rural areas.

International migration

113. The Government has not expressed its view on the recent level of immigration into the country nor on the recent emigration level. However, the Government intends to maintain the future level of emigration more or less constant.

Institutional arrangements for integrating demographic factors into development planning

114. The National Population Commission (CONAPOP) has been responsible for the formulation or co-ordination of population policies since October 1979. The same organization is responsible for taking population variables into account in planning, and is also responsible for providing information on population-development interrelationships.

Areas for international co-operation in population

115. For the next decade the Government will need assistance in the following areas, which are accorded high priority: (a) basic data collection and processing, (b) population dynamics, including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women, children, youth and the aged, and (g) population redistribution programmes.

SIERRA LEONE

Population growth

116. Although the present rate of population growth is considered to be unsatisfactory because it is too high, there is no policy with regard to population growth. The Government recognizes that the present rate of population growth has a major negative effect on socio-economic development.

Morbidity and mortality

117. Present conditions of health and the level of mortality are considered to be unacceptable. Infants, young children and women of child bearing age are identified as being of special policy concern in relation to the present level of mortality. The Government is committed to the achievement of Health for All by the Year 2000. Through a primary health care programme the Government is determined to reduce the high infant mortality rate, the incidence of malaria and other communicable diseases.

Fertility and the family

118. The Government considers the present level of fertility to be unsatisfactory because it is too high. However, there is no policy of

intervention to fertility. Programmes with relation to fertility have the objective of chiefly improving maternal and child health and family well-being. The law permits some methods and prohibits others regarding modern contraception. Indirect Governmental support (such as to private agencies) on access to methods of modern contraception is provided.

Population distribution and internal migration

119. Major changes from the present pattern of population distribution within the country are considered to be desirable. There is, however, no policy to modify population distribution. The Government views the present population growth rate in the largest metropolitan areas and other urban areas to be unsatisfactory because they are too high. No policy exists on migration into or out of urban areas or rural areas.

International migration

120. The Government has not expressed its views either on the recent level of immigration or on emigration.

Institutional arrangements for integrating demographic factors into development planning

121. The National Population Commission of Sierra Leone has been responsible for the formulation or co-ordination of population policies since 1982. The Population and Human Resources Section of the Central Planning Unit of the Ministry of Development and Economic Planning has had the responsibility of taking population variables into account in planning since 1978.

Areas for international co-operation in population

122. For the next decade, the Government would need international assistance in the following areas, which are accorded priority: (a) basic data collection and processing (advisory services in employment training, and supplies), (b) population dynamics, including analysis and training in demographic research (supplementary training - in service training), (c) formulation, implementation and evaluation of population policies and programmes (advisory services, study tours, workshops, seminars and equipment), (d) family planning programmes (advisory services and equipment supplies), (e) population communication and education (supplies, equipment, training and advisory services), (f) special programmes including the status of women, children, youth, and the aged, and (g) population redistribution programmes (advisory services, training and equipment

supplies).

TOGO

Population growth

123. The Government has not expressed its view on the present rate of population growth and there is no policy with regard to population growth as such. Neither has the Government expressed its view on the effect of population growth on socio-economic development.

Morbidity and mortality

124. Present conditions of health and the level of mortality are considered to be unacceptable. Infants are identified as being of special policy concern in relation to the present mortality level. The Government has adopted the objective of Health for All by the Year 2000. It is hoped that this objective will be achieved through the implementation of primary health care. The Government has the goal of reducing the population per doctor from 26,000 inhabitants in 1979 to 15,000 in 1985.

Fertility and the family

125. The Government has not expressed its view on the present level of fertility and there is no explicit policy with regard to fertility. However, measures for the improvement of the status of women are being implemented. The law permits all methods regarding the diffusion of information and access to methods of modern contraception. Indirect and direct Governmental support is provided regarding access to information on modern contraception.

Population distribution and internal migration

126. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. There is a policy regarding population distribution within the country with the following goals explicitly intended: (a) changes in the distribution of rural population and (b) changes in the urban-rural balance. The Government wants to reduce in-migration to the largest metropolitan areas and other urban areas and to reduce out-migration from rural areas.

International migration

127. The Government has neither expressed its views on the recent level of immigration into the country nor on emigration.

Institutional arrangements for integrating demographic factors into development

128. There is no Government agency responsible for the formulation or co-ordination of population policies. The Division de la Main d'Oeuvre, Division des données Statistiques et Direction de la Statistique all under the Direction Générale du plan de Développement are reported to be responsible for taking population variables into account in planning.

Areas for international co-operation in population

129. For the next decade, the Government will need international assistance in the following programmes, which are accorded high priority: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) population communication and education, and (d) special programmes, including the status of women, children, youth, and the aged.

UPPER VOLTA

Population growth

130. Except to answer one question, replies were not made to the questionnaires on population growth. The Government indicated that population and its problems are always the preoccupation of the Government, which considers the well-being of man as an essential objective of socio-economic development. It is stated that there is justification for the creation of a National Population Council (CNP).

Morbidity and mortality

131. Present conditions of health and the level of mortality are considered to be unacceptable. The Government has identified those in the 0-15 age group as being of special policy concern in relation to the present level of mortality. The Government is embarking on an enlarged immunization programme in order to reduce mortality and morbidity. There is a National Sanitary Programme for the period 1980-1990.

Fertility and the family

132. The Government has not expressed its view on the present level of fertility and there is no policy on fertility. Programmes which have some influence on fertility have the objective to improve maternal and child health and family well-being. For example, measures for the improvement of the status of women are being implemented. The law permits all methods regarding diffusion of information and access to methods of modern contraception but there is no Government support to these activities.

Population distribution and internal migration

133. Although the Government has not formulated its view on the present pattern of population distribution within its boundaries, there are some projects on population distribution, eg. the Project arrangement des vallées des Voltas. Government policy is to bring in changes in population distribution in rural areas and between the regions.

International migration

134. There is no Government view on either the recent level of immigration into the country or on emigration. However, the Government has indicated that it wants to maintain the future level of emigration more or less constant.

Institutional arrangements for integrating demographic factors into development planning

135. The Ministère du Plan, Direction de la Recherche Démographique, Secrétariat Permanent du Conseil National de Population, created on 20 January 1983 are responsible for the formulation or co-ordination of population policies. The Direction de la Planification du Développement (DPD) Minisère du Plan, has the responsibility of taking population variables into account in planning.

Areas for international co-operation in population

136. For the next decade, the Government will require international assistance on the following programmes which are accorded high priority: (a) basic data collection and processing, (b) formulation, implementation and evaluation of population policies and programmes (Population (Unit), (c) population communication and education, and (d) population

redistribution programmes.

3. Central Africa

CENTRAL AFRICAN REPUBLIC

Population growth

137. The Government has not expressed its view regarding the present rate of population growth and its effect on socio-economic development. There is no policy concerning population growth rate.

Morbidity and mortality

138. Present conditions of health and the level of mortality are considered to be unacceptable. The Government has identified infants and the young as being of special policy concern in relation to the present level of mortality.

Fertility and the family

139. The Government has not expressed its view on the present level of fertility. The policy of intervention to fertility has the objective of improving maternal and child health and family well-being. The law permits all methods regarding diffusion of information and access to methods of modern contraception. However, there is no Government support to these activities.

Population distribution and internal migration

140. It is considered that minor changes from the present pattern of population distribution within the country would be desirable. Government policy on internal population distribution is to bring changes in the urban-rural balance. It is felt that the population growth in the largest metropolitan areas is not satisfactory because it is too high, while the population growth in rural areas is considered to be unsatisfactory because it is too low. The Government has consequently adopted a policy to (a) increase in-migration into rural areas and at the same time decrease out-migration from rural areas, and (b) increase out-migration from the largest metropolitan areas.

International migration

141. There is no Government view on the recent immigration level into the country. However, the Government has indicated that the question of refugees from Chad is of current active policy concern. With regard to

the recent level of emigration there is no Government view on this either.

Intitutional arrangements for integrating demographic factors in development planning

142. There is neither a Government agency responsible for formulating or co-ordinating population policies nor a unit within the planning organization responsible for taking population variables into account in planning.

POPULAR REPUBLIC OF CONGO

Population growth

143. The Government has not expressed its view regarding the present rate of population growth nor its views on the effect of the country's present population growth rate. There is no explicit policy with regard to the population growth rate.

Morbidity and mortality

144. Present conditions of health and the level of mortality are considered to be unacceptable. Infants and mothers are identified as being of special policy concern in relation to the present level of mortality.

Fertility and the family

145. The present level of fertility is considered to be unsatisfactory because it is too low. The Government policy of intervention to fertility and the measures it is undertaking to reduce the effects of fertility on the rate of population growth and improving maternal and child health and family well-being. Modification of fertility has the objective of raising the fertility level. Family planning programmes are being implemented as one of the means of influencing fertility.

Population distribution and internal migration

146. The Government has not formulated its view on the present population distribution within its boundaries. However Government policy on internal population distribution within its territory is to bring changes in the urban-rural balance.

International migration

147. The Government has neither expressed its views on the recent level of immigration into the country nor on emigration.

Institutional arrangements for integrating demographic factors into development planning

148. There is no Government agency responsible for the formulation or co-ordination of population policies. The Secrétariat Général au Plan is responsible for taking population variables into account in planning.

Areas for international co-operation in population

149. For the next decade, international assistance will be required in the following programmes, which are accorded high priority by the Government: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research; (c) population communication and education. Family planning programmes and special programmes including the status of women, children, youth and the aged are also given priority for assistance.

EQUATORIAL GUINEA*

Population growth

150. The present rate of population growth is considered to be unsatisfactory because it is too low. Government policy has the objective of increasing the rate of population growth. It is felt that the country's present rate of population growth has had a negative and a positive effect on socio-economic development.

Morbidity and mortality

151. Present conditions of health and the level of mortality are considered to be unacceptable.

Fertility and the family

152. Present level of fertility is considered to be unsatisfactory because it is too low. The Government has a policy to increase the level of fertility. Measures for the improvement in the status of women and child welfare are being implemented.

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* Most of the questions in the questionnaire were not answered.

Institutional arrangements for integrating demographic factors into development planning

153. There is a Government agency responsible for the formulation or co-ordination of population policies. Within the planning organization there is a unit responsible for taking population variables into account in planning.

GABON

Population growth

154. The Government is not satisfied with the present rate of population growth because it is too low. The Government has adopted a policy to increase the rate of population growth. It is felt that the country's present rate of population growth has had a positive and a negative effect on socio-economic development. The Government wants the rate of population growth to reach 2.5 per cent per annum in 1990 and 3 per cent per annum by the year 2000.

Morbidity and mortality

155. The Government has not expressed its view on the present conditions of health and the level of mortality. The Government has adopted the declaration of Health for All by the Year 2000.

Fertility and the family

156. The present level of fertility is considered to be unsatisfactory because it is too low. The Government has a policy to increase the level of fertility. Intervention to fertility also has the objective of improving maternal and child health and family well-being. Some of the measures and programmes implemented for intervention to fertility include: (a) measures for the improvement in the status of women, (b) child welfare allowances, (c) maternity/paternity benefits, (d) other family benefits, and (e) measures for care and protection of the aged. Although the Government has the objective of increasing the fertility level, no specific targets are set. The law permits some methods regarding the diffusion of information and access to methods of modern contraception. However, there is no Government support to these activities.

Population distribution and internal migration

157. The Government has not formulated its view on the present population distribution within the country. While there is no explicit policy on internal migration, changes are sought in the urban-rural balance. The present rate of population growth in the largest metropolitan areas and other urban areas is considered to be too high while that in the rural areas is said to be too low. Consequently, the Government would like to reduce in-migration to the largest metropolitan areas and other urban areas and to reduce out-migration from rural areas.

International migration

158. The recent immigration level into the country is considered to have been significant. However, immigration of workers is of current active policy concern and the Government's policy is to reduce the future level of immigration. It is considered that the recent immigration level has had a positive contribution to economic development. Although the Government considers recent emigration levels to have been satisfactory, it wants to reduce future levels of emigration.

Institutional arrangements for integrating demographic factors into development planning

159. There is no Government agency responsible for the formulation or co-ordination of population policies. The Direction de la Planification des Ressources Humaines in the Commissariat Général au plan et au Développement is responsible for taking population variables into account in planning.

Areas for international co-operation in population

160. For the next decade, the Government will require international assistance in the following programmes which are accorded high priority: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, and (c) population communication and education.

SAO TOME AND PRINCIPE

Population growth

161. The Government has not expressed its view on the present rate of population growth and its effects on socio-economic development. There

is no policy with regard to population growth.

Morbidity and mortality

162. Present conditions of health and the level of mortality are considered to be unacceptable. The population aged 0-5 is identified as being of special concern in relation to the present level of mortality. The Government is intensifying the immunization programme in its efforts to reduce morbidity and mortality.

Fertility and the family

163. The Government is satisfied with the present level of fertility. The policy of intervention to fertility has the main objective of improving maternal and child health and family well-being. To this effect, family planning programmes and measures to improve the status of women are being implemented.

Population distribution and internal migration

164. The Government has not formulated its view on the present population distribution within its boundaries. However, it has indicated that it wants to bring in changes between the regions.

International migration

165. The Government has neither expressed views on the recent level of immigration nor on the level of emigration.

Institutional arrangements for integrating demographic factors into development planning

166. There is no Government agency responsible for the formulation or co-ordination of population policies. Within the planning organization there is no unit responsible for taking population variables into account in planning.

Areas for international co-operation in population

167. None of the population programmes is accorded high priority for the next decade. However, the Government has indicated that it would require international assistance in the following programmes for the next decade: (a) basic data collection and processing, (b) formulation, implementation and evaluation of population policies and programmes, (c) family planning programmes, and (d) population communication and education.

CAMEROON

Population growth

168. The Government has not expressed its view on the present rate of population growth, and there is no explicit policy with regard to it. There is no Government view on the effects of the present population growth rate on socio-economic development.

Morbidity and mortality

169. There is no Government view on the present conditions of health and the mortality level. However, the Government's objective is to provide basic health needs to its population in combating the various health problems to improve mother and child health. Particular emphasis is on primary health care and on rural medical care.

Fertility and the family

170. The Government has not expressed its view on the present level of fertility. Intervention to fertility has the main objective of improving maternal and child health and family well-being. Measures and programmes implemented by the Government with influence on fertility, include maternity/paternity benefits. The Government does not believe in forcing the population to limit fertility, rather it leaves to the individuals to decide on the number of children they want to have. The law permits all methods regarding diffusion of information and access to methods of modern contraception and there is Government support regarding access to information on modern contraception.

Population distribution and internal migration

171. It is considered that minor changes from the present pattern of population distribution would be desirable. It is indicated that there is no explicit policy regarding population distribution within the country although changes are sought to bring about urban-rural balance. The present rate of population growth in the largest metropolitan areas is considered to be unsatisfactory because it is too high. The Government wants to reduce in-migration to the largest metropolitan areas and other urban areas and to reduce out-migration from rural areas.

International migration

172. The Government has not expressed its view either on the recent level of immigration or emigration.

Institutional arrangements for integrating demographic factors into development planning

173. There is no Government agency responsible for the formulation or co-ordination of population policies. The Direction de la Statistique et de la Comptabilité Nationale and the Direction de la Planification, both in the Ministry of Economic Planning, are responsible for taking population variables into account in planning.

Areas for international co-operation in population

174. For the next decade, the Government will need international assistance on the following programmes which are accorded high priority: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, and (d) population communication and education.

ZAIRE

Population growth

175. The present rate of population growth is said to be satisfactory. There is no explicit policy with regard to population growth. The Government has not expressed a view on the effects of the present rate of population growth on socio-economic development.

Morbidity and mortality

176. The present conditions of health and the level of mortality are considered to be unacceptable. The population aged 0-5 has been identified as being of special concern in relation to the present level of mortality.

Fertility and the family

177. The Government has not expressed its view regarding the present level of fertility and there is no explicit policy on fertility. However, some measures and programmes implemented by the Government which have a

relation to fertility include the improvement in the status of women. The law prohibits all methods regarding diffusion of infromation and access to methods of modern contraception.

Population distribution and internal migration

178. It is considered that major changes from the present pattern of population distribution within the country would be desirable. Government policy has the objective of bringing changes in the urban-rural balance in population distribution. The Government wants to increase in-migration into rural areas, and decrease out-migration from rural areas; decrease in-migration to the largest metropolitan areas and other urban areas and increase out-migration from these areas.

International migration

179. The Government has not expressed its views on either the recent level of immigration into the country nor on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

180. There is neither a Government agency responsible for formulation or co-ordination of population policies nor a unit in the planning organization responsible for taking population variables into account in planning.

4. East Africa

BURUNDI

Population growth

181. The Government is not satisfied with the present rate of growth because it is too high. Government policy is to reduce the rate of population growth. It is considered that the country's present rate of population growth has had a minor negative effects on socio-economic development.

Morbidity and mortality

182. Present conditions of health and the level of mortality are considered to be unacceptable. Programmes on immunization for the young are being implemented to combat infectious and communicable diseases.

Fertility and the family

183. The present fertility level is considered to be unsatisfactory because it is too high. Policy on fertility has the major objective of both modifying the effect of fertility on the rate of population growth and improving maternal and child health and family well-being. Modification of fertility has the objective of lowering the fertility level. Measures and programmes implemented by the Government which have an impact on fertility include: (a) family planning programmes and (b) measures to improve the status of women. The law permits some methods and prohibits others regarding diffusion of information and access to methods of modern contraception and the Government gives direct support to such activities.

Population distribution and internal migration

184.. The Government considers that minor changes from the present pattern of population distribution within its boundaries would be desirable. Policy on population distribution within the country has the objective of bringing changes between the regions. Population growth rates in the largest metropolitan areas, other urban areas and in rural areas are considered to be unsatisfactory because they are too high. Government policy is to reduce out-migration from rural areas.

International migration

185. Both recent immigration and emigration levels are considered to have been insignificant.

Institutional arrangements for integrating demographic factors into development planning

186. The Centre for Demographic Studies for Development and the Direction Générale de la Planification are responsible for taking population variables into account in planning.

Areas for international co-operation in population

187. For the next decade, the Government has indicated that it will need international assistance in the following programmes: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family

planning programmes, (e) population communication and education,(f) special programmes including the status of women, children, youth and the aged, and (g) population redistribution.

COMORO ISLANDS

Population growth

188. The Government has not expressed its view on the present rate of population growth and there is no policy with regard to population growth as such. Neither has the Government expressed its view on the effect of population growth on socio-economic development.

Morbidity and mortality

189. Present conditions of health and the level of mortality are considered to be unacceptable. The Government has not expressed views regarding identification of specific population groups requiring special policies, in view of the present level of mortality. However, the Government considers reinforcement of preventive health care as warranting special attention.

Fertility and the family

190. The Government has not expressed its view on the present level of fertility and there is no policy with regard to it.

Population distribution and internal migration

191. The Government has not formulated its view on the present population distribution within its boundaries. There is no policy regarding population distribution within its territory.

International migration

192. The Government considers that the recent level of immigration into the country has been significant. However, the Government has not expressed views on the effect of this immigration level on socio-economic development nor has it expressed views on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

193. There is neither a Government agency responsible for the formulation or co-ordination of population policies nor a unit within the planning organization responsible for taking population variables into account in planning.

DJIBOUTI

Population growth

194. The Government has not expressed its view on the present rate of population growth and there is no explicit policy concerning population growth, neither has the Government expressed its view on the effect of the present rate of population growth on socio-economic development.

Morbidity and mortality

195. There is no Government view regarding present conditions of health and the level of mortality. However, the Government is concerned about providing a good health system to enable the population to contribute actively to socio-economic development. It is developing primary health care as a base for achieving the objective of Health for All by the Year 2000.

Fertility and the family

196. The Government has not expressed views on the present level of fertility and there is no explicit policy on fertility as such. Intervention to fertility has the objective of improving maternal and child health and family well-being.

Population distribution and internal migration

197. The Government has not formulated its view on the present population distribution within its boundaries. There is no explicit policy on population distribution within the country.

International migration

198. The recent level of immigration into the country is considered to have been significant. The problem of refugees is of current policy concern. Immigration is considered to have had a negative effect on socio-economic development and the Government wants to reduce the future level of immigration. There is no Government view regarding the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

199. There is neither a Government agency responsible for the formulation or co-ordination of population policies nor a unit within the planning organization responsible for taking population variables into account in planning.

Areas for international co-operation in population

200. For the next decade, the Government will need assistance in the following programmes which are accorded high priority: (a) basic data collection and processing, and (b) formulation, implementation and evaluation of population policies and programmes.

ETHIOPIA

Population growth

201. For the first time, the Government has indicated that the present rate of population growth is not satisfactory because it is too high. However, there is no policy on population growth as such. The Government considers that the country's present rate of population growth has minor negative effect on socio-economic development.

Morbidity and mortality

202. Present conditions of health and the level of mortality are considered to be unacceptable. Infants and children are identified as being of special policy concern in relation to the present level of mortality. The Government has identified the following as being of special policy concern: control of communicable diseases, and improvement of sanitation (safe drinking water and latrine provision). The Government has endorsed the declaration on Health for All by the Year 2000 and the primary health programme.

Fertility and the family

203. The present level of fertility is considered to be unsatisfactory because it is too high. However, there is no policy with regard to fertility. Regarding access to information and methods of modern contraception, there is direct Governmental support, such as programmes implemented by Governmental services.

Population distribution and internal migration

204. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable, but there is no explicit policy as such to modify the distribution of population.

International migration

205. The Government has not expressed its view on the recent level of immigration into the country nor on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

206. There is neither a Government agency responsible for the formulation or co-ordination of population policies nor a unit within the planning organization responsible for taking population variables into account in planning.

Areas for international co-operation in population

207. For the next decade, the Government will need international assistance and co-operation in the following programmes which are accorded high priority by the Government: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women, children, youth and the aged, and (g) population redistribution programmes.

MADAGASCAR

Population growth

208. The Government has not expressed its view on the present rate of population growth, and there is no population policy with regard to population growth. There is no Government view regarding the effects of population growth rate on socio-economic development.

Morbidity and mortality

209. Present conditions of health and the level of mortality are considered to be unacceptable. In relation to the present level of mortality, the Government has identified elderly women, those aged 0-5 and the rural population as being of special policy concern. The Government considers eradication of communicable diseases, malnutrition and promotion of maternal and child health to be of special policy concern. The Government targets regarding mortality/morbidity are: (a) infant mortality rate to be less than 70 per 1000 by 1985 and (b) prevalence of malnutrition to be less than 10 per cent by 1985.

Fertility and the family

210. The Government has not expressed views on the present level of fertility and there is no explicit policy with regard to it. The law permits some methods and prohibits others regarding diffusion of information and access to methods regarding modern contraception. Abortion is prohibited. Both indirect and direct Governmental support to access on information and methods of modern contraception is provided.

Population distribution and internal migration

211. It is considered that minor changes from the present pattern of population distribution within the country would be desirable. Government policy on population distribution within its territory has the explicit objectives of bringing in change in the urban-rural balance and also changes between the regions. Consequently, the policy is to increase in-migration to rural areas and at the same time decrease out-migration from rural areas; and decrease in-migration to the largest metropolitan areas.

International migration

212. The Government has neither expressed its view on the recent level of immigration into the country nor on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

213. The Ministry of Population and Social Conditions has been responsible for the formulation or co-ordination of population policies since 1977. The Direction Générale du Plan attached to the President's Office has been responsible for taking population variables into account in planning since 1975. The Institut National de la Statistique et de la Recherche Economique, has been responsible for providing information on population development interrelationships since 1972.

Areas for international co-operation in population

214. For the next decade, the Government has accorded high priority to the following programmes for which international assistance and co-operation will be required: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) family planning programmes, (d) population communication and education, (e) special programmes including the status of women, children, youth and the aged, (f) population redistribution programmes.

MAURITIUS

Population growth

215. The Government considers the present rate of population growth to be unsatisfactory because it is too high and there is a policy to reduce the rate of growth. The present population growth rate is considered to have a major negative effect on socio-economic development. The policy of intervention has the objective of reaching a gross reproduction rate of 1.1 by the mid-1980's in an effort to reduce the population growth rate.

Morbidity and mortality

216. The Present conditions of health and the mortality level are considered to be unacceptable. Malaria, tuberculosis, gastroenteritis, diabetes, and anaemia are among those diseases considered to warrant special policy issues. The Government wants to eradicate malaria within the next five years and it is committed to the target of Health for All by the Year 2000. In this context, it is increasing the number of service points to bring health care nearer to the population.

Fertility and the family

217. The present level of fertility is considered to be unsatisfactory because it is too high. The policy of intervention has the object to both modify the effect of fertility on the rate of population growth and to improve maternal and child and family well-being. The objective of fertility modification is to reduce the fertility level. Some of the measures and programmes implemented pursuant to the policy of intervention in relation to fertility are: family planning programmes, measures for the improvement of the status of women and a change in minimum legal age of marriage for women from 15 to 18 years. The Government target is to reduce the gross reproduction rate from about 1.5 in 1979 to about 1.1 by 1987. The law permits all methods regarding diffusion of information and access to methods of modern contraception and there is Governmental support to these activities, particularly those implemented by Governmental services.

Population distribution and internal migration

218. The Government has not formulated a view on the present distribution of the population within its boundaries and there is no policy regarding population distribution.

International migration

219. The recent level of immigration into the country is considered to have been insignificant. However, the recent level of emigration is considered to have been unsatisfactory because it has been low and Government policy is to increase the future level of emigration. The Government wants to increase the emigration level in order to decrease the demand for employment and thus reduce the unemployment level.

Institutional arrangements for integrating demographic factors into development planning

220. The Ministry of Economic Planning and Development is responsible for the formulation or co-ordination of population policies since 1971. The Human Resources Section and the Economic Analysis and Research Section are the two units responsible for taking population variables into account in planning since 1978 and 1980, respectively.

Areas for international co-operation in population

221. For the next decade, the Government will require international assistance and co-operation in the following programmes accorded high priority: (a) population dynamics including analysis and training in demographic research, (b) family planning programmes, (c) poulation communication and education, and (d) special programmes including the status of women, children, youth and the aged. Lower priority is accorded to: (a) basic data collection and processing, and (b) formulation, implementation and evaluation of population policies and programmes.

MOZAMBIQUE

Population growth

222. The present rate of population growth is considered to be satisfactory and there is no policy with regard to its future growth. The Government has not expressed its view on the effect of population growth on socio-economic development.

Morbidity and mortality

223. The Government considers present conditions of health and the level of mortality to be unacceptable. Children under five years and women are identified as being of special policy concern in relation to the present

level of mortality. The Government wants to reduce the infant mortality rate caused by infectious and parasitic diseases by 50 per cent by the year 2000. The Government approved the Declaration of Alma Ata on Health and has adopted a primary health care policy.

Fertility and the family

224. The present level of fertility is considered to be satisfactory and there is no policy on fertility. The law permits all methods regarding diffusion of information and access to methods of modern contraception. Direct Governmental support, such as programmes implemented by Governmental services, is provided.

Population distribution and internal migration

225. The Government considers that major changes from the present pattern of population distribution would be desirable. There is a policy to bring changes in the urban-rural balance, and also changes between the regions. The present population growth rate in urban areas is considered to be unsatisfactory because it is too high. Consequently, there is a policy to decrease in-migration to urban areas.

International migration

226. There is no Government view regarding the recent level of immigration into the country and the recent emigration level is considered to have been insignificant.

Institutional arrangements for integrating demographic factors into development planning

227. There is no Government agency responsible for the formulation or co-ordination of population policies. Although it was stated in the reply to the Fifth Inquiry that there is a unit within the planning organization responsible for taking population variables into account, such a unit was not identified.

Areas for international co-operation in population

228. For the next decade, population programmes given high priority are: (a) basic data collection and processing, and (b) population dynamics including analysis and training in demographic research. International assistance and co-operation will be needed in implementation of these

programmes. Second priority is accorded to: (a) formulation, implementation and evaluation of population policies and programmes, (b) family planning programmes, and (c) population communication education.

RWANDA

Population growth

229. The present population growth rate is considered to be unsatisfactory because it is too high and the Government's policy is to reduce the rate of growth. It is the Government's view that the country's present rate of population growth has had a major negative effect on socio-economic development. The Government hopes to limit the population growth rate to 3.7 per cent per annum between 1982 and 1985 and reduce it to 3.5 per cent by 1986 and after that it is hoped that the decline will be more rapid.

Morbidity and mortality

230. Although present conditions of health and the level of mortality are reported to be acceptable, mothers and children aged 0-5 years are identified as being of special policy concern. Application of family planning programmes integrated in maternal and child health as a basis for health care is identified as meriting special policy concern in reducing morbidity and mortality. Government targets are to reduce: (a) mortality rate from 17 per 1,000 in 1978 to 14 per 1,000 in 1986, (b) infant mortality rate from 143 per 1,000 live births in 1978 to 96 per 1,000 in 1986, and (c) child mortality (1-5) from 88 per 1,000 in 1973 to 60 per 1,000 in 1986.

Fertility and the family

231. The present fertility level is considered to be unsatisfactory because it is too high, and the Government policy of intervention has the objective of both modifying the effect of fertility on the rate of population growth and improving maternal and child health and family well-being. The objective of modification is to reduce the level of fertility. Measures and programmes implemented with effect on fertility include family planning programmes. The law allows some methods regarding diffusion of information and access to methods on modern contraception and direct Governmental support is provided to such activities.

Population distribution and internal migration

232. The Government considers that major changes from the present pattern of population distribution within its boundaries would be desirable. The policy of the Government is to bring changes in the distribution of population in the rural areas. Population growth rates in the largest metropolitan areas, other urban areas and in rural areas is considered to be too high.

International migration

233. The Government has not expressed its view on the recent level of immigration into the country except for the issue of refugees which is of active policy concern. Although there is no Government view on the recent level of emigration, Government policy is to increase the future level.

Institutional arrangements for integrating demographic factors into development planning

234. The National Population Office has been responsible for the formulation or coordination of population policies since January 1981. The Human Resources Division in the Direction Générale de la Planification has been responsible for taking population variables into account in planning since 1962.

Areas for international co-operation in population

235. The Government will need international co-operation and assistance for the next decade for the following programmes, which are accorded high priority by the Government: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women, children, youth and the aged, and (g) population redistribution programmes.

SOMALIA

Population growth

236. The Government has not expressed its view on the present rate of population growth and there is no explicit policy with regard to population growth. It has also not expressed its view on the effect of

population growth on socio-economic development. However, it has indicated that it is aware of the importance of the interrelationships between population growth and socio-economic development.

Morbidity and mortality

237. Present conditions of health and the level of mortality are considered to be unacceptable. Infants, young children, women in the reproductive age, rural and nomadic population, in addition to the population in general, are all considered as being of special policy concern in relation to the present level of mortality. The Government wants to reduce malaria morbidity as well as schistosmiasis and their eventual control. For the period 1982-1986 the Government has the following objectives regarding health: (a) extend primary health care at village level, (b) extend immunization programmes, and (c) develop supporting services with adequate provision of drugs and training of health personnel at all levels.

Fertility and the family

238. The Government has not expressed its view on the present level of fertility and there is no explicit policy on fertility. There is indirect Governmental support, such as that to private agencies, on access to information and methods regarding modern contraception.

Population distribution and internal migration

239. The Government has not expressed its view on the present distribution of population and there is no explicit policy with regard to population distribution.

International migration

240. The Government has not expressed its view on recent levels of immigration except on the question of refugees which is of active policy concern. The Government has indicated that the inflow of refugees has had a negative effect on economic development. There is also no Government view on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

241. There is no government agency responsible for the formulation or co-ordination of population policies. The Ministry of National Planning is responsible for taking population variables into account in planning.

Areas for international co-operation in population

242. For the next decade, the Government has accorded high priority to the following population programmes for which international assistance and co-operation will be needed: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) population communication and education, and (e) special programmes including the status of women, children, youth and the aged. Family planning programmes and population redistribution programmes are accorded second priority.

UGANDA

Population growth

243. The present rate of population growth is considered to be unsatisfactory because it is too high and there is a policy to reduce it. It is felt that the country's present rate of population growth rate has had a minor negative effect on socio-economic development.

Morbidity and mortality

244. Present conditions of health and the level of mortality are considered to be unacceptable. Mothers and children are identified as being of special policy concern in relation to the present level of mortality; primary health care is also considered to be of policy concern.

Fertility and the family

245. The Government considers the present level of fertility to be unsatisfactory because it is too high. There is a policy of intervention to fertility with the objective of both modifying the effect of fertility on the rate of population growth and to improving maternal and child health care and family well-being. The objective of modification is to reduce the level of fertility. Some of the measures and programmes implemented which have an effect on fertility include: family planning programmes, measures for the improvement in the status of women, and maternity/paternity benefits. Some methods are permitted by law and others are prohibited regarding diffusion of information and access to methods of modern contraception. Abortion is prohibited. There is direct Governmental support (such as programmes implemented by Governmental services) regarding access to information and methods of modern contraception.

Population distribution and internal migration

246. Although the Government considers that minor changes from the present pattern of population distribution would be desirable, there is no explicit policy on population distribution within its territory. Changes are sought in the urban-rural balance. Population growth rate in the largest metropolitan areas is considered to be unsatisfactory because it is too high.

International migration

247. Although the Government has not expressed its view on the recent level of immigration into the country, it has indicated that immigration for permanent resettlement, immigration of workers and their dependents, undocumented/illegal immigrants and refugees are all of active policy concern. However, it has indicated that it wants to maintain the future level of immigration more or less constant. It has indicated that the recent immigration level has contributed positively to economic development. The Government has not expressed views on the recent level of emigration. But it has indicated that, on balance, emigration has had a negative effect on socio-economic development, particularly the emigration of professional and other highly trained people, whom the Government would like to return to the country.

Institutional arrangements for integrating demographic factors into development planning

248. The Ministry of Planning and Economic Development has been responsible for the formulation and co-ordination of population policies since 1962. The Social Service Section of the Ministry of Planning and Economic Development has been responsible for taking population variables into planning since the 1960's. The population unit of the Institute of Statistics and Applied Economics at Makerere University is responsible for providing information on population-development interrelationships.

UNITED REPUBLIC OF TANZANIA

Population growth

249. The present rate of population growth is considered to be unsatisfactory because it is too high. However, there is no explicit policy with regard to the rate of population growth. It is considered that the country's present rate of population growth has had a minor negative effect on socio-economic development. The Government has stated that it is aware of some relationships between population growth and economic growth and that there are further studies being undertaken on the inter-relationships between population growth and economic development.

Morbidity and mortality

250. The Government considers the present conditions of health and the level of mortality to be unacceptable. The under-five years old are identified as being of special policy concern in relation to the present level of mortality. The Government has adopted a primary health care programme in its efforts to reduce morbidity and mortality rates.

Fertility and the family

251. The Government considers the present level of fertility to be unsatisfactory because it is too high, but there is no explicit policy with regard to fertility. Some of the measures and programmes implemented which have an effect on fertility include: (a) family planning programmes (implemented on health grounds), (b) measures for the improvement on the status of women, (c) maternity/paternity benefits (implemented on health grounds) and (d) child welfare allowance. Some methods are permitted and others are prohibited by law regarding diffusion of information and access to methods of modern contraception. Abortion is prohibited. Both direct and indirect Governmental support is provided on access to information and methods of modern contraception.

Population distribution and internal migration

252. Major changes from the present pattern of population distribution are desirable. Government policy is to bring changes in the urban-rural balance. Present rates of population growth in the largest metropolitan areas are considered to be unsatisfactorily too high. Government policy is to decrease in-migration to the largest metropolitan areas and other urban areas and decrease out-migration from rural areas.

International migration

253. The recent level of immigration into the country is considered to have been insignificant, but the refugees issue is of active policy concern. Recent levels of emigration are also said to have been insignificant.

Institutional arrangements for integrating demographic factors into development planning

254. There is no Government agency responsible for the formulation or co-ordination of population policies. Within the planning organization there is no unit responsible for taking population variables into account in planning.

Areas for international co-operation in population

255. For the next decade, the Government has accorded priority to the following programmes for which international assistance and co-operation will be needed: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) population communication and education. Second priority is given to the formulation, implementation and evaluation of population policies and programmes, family planning programmes and population redistribution programmes.

ZAMBIA

Population growth

256. The Government has not expressed views on the present rate of population growth and there is no explicit policy with regard to the rate of population growth. It is felt that the country's present rate of growth has both positive and negative contributions to socio-economic development, neither one overriding the other. The policy of the Government is one of encouraging and supporting family planning activities directed towards the spacing of births and improving the quality of health of parents and their children.

Morbidity and mortality

257. Present conditions of health and the level of mortality are considered to be unacceptable. The population under five years old and the aged are identified as being of special policy concern in relation to the

present level of mortality. Morbidity and mortality issues which are considered as of special policy concern are those caused by malaria, measles, respiratory diseases, and diarrhoea. The Government, in its attempts to reduce morbidity and mortality incidence, wants to make available basic but essential health care to all the people of Zambia through development of an effective and integrated national health care system.

Fertility and the family

258. The Government has not expressed its view on the present level of fertility and there is no explicit policy with regard to fertility. However, the following measures and programmes which have relation to fertility are being implemented: (a) family planning programmes (on the basis of child and maternal health), (b) measures for the improvement of the status of women, (c) maternity/paternity benefits, and (d) measures for the protection of the aged. Regarding diffusion of information on methods and access to methods on modern contraception, the law permits some methods and prohibits others. Abortion is prohibited except where the life of the mother is at risk. Indirect Governmental support (such as to private agencies) is provided regarding access to information and methods of modern contraception.

Population distribution and internal migration

259. Major changes from the present pattern of population distribution within the country are considered to be desirable. The policy of the Government regarding population distribution within the country is to bring changes in the urban rural balance. Population growth rate in the largest metropolitan areas is considered to be too high and that in the rural areas too low. The Government wants to decrease in-migration to the largest metropolitan areas and other urban areas and to decrease out-migration from the rural areas. Considering that 43 per cent of its population is in urban areas, the Government strategy of reducing rural-urban migration is to be through improvement of social and economic conditions in rural areas.

International migration

260. There is no Government view regarding the recent level of immigration into the country. However, the question of undocumented/illegal immigrants and refugees/asylum seekers are of active policy concern. The

Government has not expressed a view on the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

261. The Social and Cultural Committee of the Central Committee has been responsible for the formulation or co-ordination of population policies since 1973. The Manpower Planning Department in the National Commission for Development Planning has been responsible for taking population variables into account in planning since 1980.

Areas for international co-operation in population

262. For the next decade, the Government has accorded high priority to the following programmes for which international assistance and co-operation will be required: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) population communication and education, and (d) special programmes including the status of women, children, youth and the aged.

ZIMBABWE

Population growth

263. The Government has not expressed its view on the present rate of population growth and there is no explicit policy with regard to population growth. Neither has the Government expressed views on the effect of the population growth rate on socio-economic development.

Morbidity and mortality

264. Present conditions of health and the level of mortality are considered to be unacceptable. To this effect, infants have been identified as being of special policy concern, the main emphasis is on rural areas and more preventive measures than curative health services.

Fertility and the family

265. The Government has not expressed its views on the present level of fertility. However, there is a policy of intervention which has the objective of both modifying the effect of fertility on the rate of population growth and improving maternal and child health and family well-being. The Government wants to lower the fertility level. Some of the measures and programmes implemented which have an effect on fertility

are family planning programmes and measures for the improvement of the status of women. Regarding diffusion of information on methods and access to methods of modern contraception, some methods are permitted by law and others are prohibited. The injection DEPOVERA is prohibited by law. Indirect Governmental support (such as to private agencies) regarding access to information and methods of modern contraception is provided.

Population distribution and internal migration

266. It is considered that minor changes from the present pattern of population distribution within the country would be desirable. Government policy has the explicit goal of bringing in changes in the distribution of the rural population. The Government has a policy to decrease in-migration to the largest metropolitan areas and other urban areas and to decrease out-migration from the rural areas.

International migration

267. The recent level of immigration into the country is considered to have been significant. Immigration of workers and their dependents is of active policy concern. Government policy is to reduce the future level of immigration. It is felt that recent immigration has contributed positively to economic development. With regard to the recent level of emigration, there is no Government view on this.

Institutional arrangements for integrating demographic factors into development planning

268. There is no Government agency responsible for the formulation or co-ordination of population policy. Arrangements for the establishment of a population unit to be responsible for taking population variables into account in planning are underway. Draft proposals are being studied.

Areas for international co-operation in population

269. For the next decade, the following programmes are accorded high priority by the Government: (a) basic data collection and processing, (b) population dynamics including analysis and training in demographic research, (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) special programmes including the status of women, children, youth and the aged, (f) population redistribution programmes. International assistance and co-operation will be needed in implementing these programmes.

5. Southern Africa

BOTSWANA

Population growth

270. The Government has not expressed its view on the present rate of population growth and there is no explicit policy with regard to the rate of population growth. Although the Government did not express its views on the effects of the population growth rate in the reply to the Inquiry, in the 1970-1973 Development Plan it was stated that "At Botswana's stage of development, economic growth is in no way assisted by the rising population. Living conditions are reduced in direct proportion to population growth ... " and the following statement is found in the 1973-1978 Development Plan "A relatively rapid population increase if sustained over a number of years could seriously reduce and retard the general impact of economic development on the lives of Botswana's people". The effect of population growth is emphasized again in the 1979-1985 Development Plan.

Morbidity and mortality

271. Present conditions of health and the level of mortality are considered to be unacceptable. To this effect, infants, children, mothers and low-income groups are identified as being of policy concern. Morbidity and mortality issues considered as being of special policy concern include poor nutrition, bad environmental conditions and overcrowding. Primary health care with full community participation is being advocated. The Government has targets to reduce infant mortality below 50 per 1,000 births per year and to increase life expectancy at birth to above 60 years by 2000.

Fertility and the family

272. The Government has not expressed its view on the present level of fertility and it is stated that there is no explicit policy with regard to fertility. Intervention to fertility has the chief objective of improving maternal and child health and family well-being. Measures and programmes implemented which have a relation to fertility are: (a) family planning programmes and maternity benefits. Regarding diffusion of information on methods and access to methods of modern contraception, all methods are permitted by law. Direct Governmental support (such as programmes implemented by Governmental services) is provided on access to information and

access to methods regarding modern contraception. On family planning, the Government has an objective of covering 15 per cent acceptance by women of reproductive age by 1985.

Population distribution and internal migration

273. The Government has not formulated its view on the present pattern of population distribution within the country and there is no explicit policy on population distribution within the country.

International migration

274. The recent level of immigration is said to have been insignificant but the issue of refugees is of active policy concern. However, the recent level of immigration is said to have contributed positively to economic development. Recent level of emigration is also said to have been insignificant.

Institutional arrangements for integrating demographic factors into development planning

275. There is neither a Government agency responsible for the formulation or co-ordination of population policies nor a unit within the planning organization responsible for taking population variables into account in planning.

LESOTHO

Population growth

276. The present rate of population growth is considered to be unsatisfactory because it is too high. Government policy is to decrease the rate of population growth. It is considered that the country's present rate of population growth has had a minor negative effect on socio-economic development.

Morbidity and mortality

277. Present conditions of health and level of mortality are considered to be unacceptable. The population below five years and mothers have been identified as being of special policy concern in relation to the present level of mortality. Environmental conditions, safe drinking water, tuberculosis and venereal diseases and primary health care are identified being of special policy concern.

Fertility and the family

278. The Government considers the present level of fertility to be unsatisfactory because it is too high. There is a policy of intervention to fertility with the objective of both to modify the effect of fertility on population growth rate and to improve maternal and child health and family well-being.

279. The objective of fertility modification is to reduce the level of fertility. Family planning programmes are implemented to this effect. Measures for the improvement on the status of women are also being implemented. For example, there is a Bureau for Women's Affairs. The law permits some methods and prohibits others on the diffusion of information on methods regarding modern contraception. Abortion is prohibited. Direct Governmental support (such as to programmes implemented by Governmental services) is provided on access to information on modern contraception.

Population distribution and internal migration

280. The Government considers that major changes from the present pattern of population distribution would be desirable. However, there is no explicit policy regarding population distribution within the country. It has been stated that changes in the urban-rural balance and changes between regions are sought. The present rate of population growth rate in the largest metropolitan area and in the rural areas is considered to be too high while those in other urban areas are considered to be satisfactory. The Government wants to decrease out-migration from rural areas.

International migration

281. There is no Government view on the recent immigration level into the country except on the issue of refugees which is of active policy concern. The Government has indicated that it wants to maintain the level of immigration more or less constant in the future. With regard to the recent level of emigration the Government has said that the level was too high and there is a policy to reduce the level of emigration in the future. The Government considers that the recent level of emigration has contributed positively to socio-economic development.

Institutional arrangements for integrating demographic factors into development planning

282. The Social Infrastructure Sector in the planning organization is responsible for taking into account population variables in planning.

Areas for international co-operation in population

283. For the next decade the Government has accorded high priority to the following programmes: (a) basic data collection and processing (vital statistics and NHSCP), (b) population dynamics including analysis and training in demographic research (teaching of demography), (c) formulation, implementation and evaluation of population policies and programmes, (d) family planning programmes, (e) population communication and education, (f) special programmes including the status of women, children, youth and the aged (research), and (g) population redistribution programmes (establishment of village industries).

SWAZILAND

Population growth

284. The Government considers the present rate of population growth to be unsatisfactory because it is too high. However, there is no explicit policy with regard to the rate of population growth. The Government has stated that the country's present rate of population growth has a major negative effect on socio-economic development.

Morbidity and mortality

285. Present conditions of health and the level of mortality are considered to be unacceptable. The population aged 0-5 is identified as being of special policy concern in relation to present level of mortality. Programmes intended to achieve Health for All by the Year 2000 are being implemented.

Fertility and the family

286. Although the present level of fertility is considered to be too high, there is no explicit policy with regard to fertility. A policy of intervention to fertility has the main objective of improving maternal and child health and family well-being. To this effect, family planning programmes are being implemented. The law permits some methods and prohibits others regarding diffusion of information on methods of modern

contraception. While abortion is illegal, a doctor's prescription is required for some oral pills. Direct and indirect Governmental support is provided regarding access to information on modern contraception.

Population distribution and internal migration

287. There is no Government view on the present distribution of population within its boundaries and there is no explicit policy on population distribution within its territory. It is the Government's view that the present rate of population growth in the largest metropolitan areas is unsatisfactory because it is too high.

International migration

288. The Government has not expressed a view on either the recent level of immigration or the recent level of emigration.

Institutional arrangements for integrating demographic factors into development planning

289. There is neither a Government agency responsible for the formulation or co-ordination of population policies nor a unit within the planning organization responsible for taking into account population variables in planning.